## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
			<u> </u>
FEE DETERMINATION			<u> </u>
O.I.P.E. CLASSIFIER			<u> </u>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			<del> </del>
	+1-		1-1-01

## INDEX OF CLAIMS

	Dejected	N	Non-elected
~	Rejected	i	Interference
	Allowed	Δ	Appeal
_	(Through numeral) Canceled	Λ	Objected
	Restricted	U	

•			Claim	Date
Claim-	Oate Date	Claim		119111
123	TO SERVICE SER	Claim Date    Public   Public	Final Original	
1 2 5	[ <b>4</b> 6]	Final Original		
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-	<del>                                      </del>	51) - N N	101	<del>- - - - -</del>
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- - -	<del>╽═╏╸╏╺╬╸┞╶╃╍╂┈╇</del> ═╁┈┤	54	104	<del>┈╎╌╏═╽═╏</del> ╌┠╴┞═┥
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118		-  <b>    </b>	113	10 10 15 15 15 15 15 15 15 15 15 15 15 15 15
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25	<del>┇┇┇╶┇╒┪</del> ╌╏╌╏╌╂╾╆═╅═┤	76	126	<del>╽╶╽╶╏╸</del> ╏
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If more than 150 claims or 10 actions staple additional sheet here